

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

10700319

CLAIMS AS FILED - PART I

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

RATE	FEE
X \$	
X \$	
+ \$	
TOTAL	

OR

OTHER THAN SMALL ENTITY

RATE	FEE
X \$	
X \$	
+ \$	
TOTAL	

CLAIMS AS AMENDED - PART II

4-8-05

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	23	20	4
Independent (37 CFR 1.16(b))	6	3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ 25	
X \$ 100	
+ \$	
TOTAL	
ADDITIONAL FEE	

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ 50	200.00
X \$ 200	800.00
+ \$	
TOTAL	
ADDITIONAL FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))			
Independent (37 CFR 1.16(b))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL	
ADDITIONAL FEE	

OR

RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL	
ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))			
Independent (37 CFR 1.16(b))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL	
ADDITIONAL FEE	

OR

RATE	ADDITIONAL FEE
X \$	
X \$	
+ \$	
TOTAL	
ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing its burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call the USPTO at 1-800-451-5293 and select option 2.

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 41942-05546	
Applicant(s): MORTIZ, Margaret S.						
Application No. 10/700,319	Filing Date November 3, 2003	Examiner Not Yet Assigned	Customer No. 25231	Group Art Unit 3736	Confirmation No. 5097	
Invention: PULSE OXIMETRY SpO2 DETERMINATION						
COMMISSIONER FOR PATENTS:					RECEIVED CENTRAL FAX CENTER APR 08 2005	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	24	20	4	x \$18.00	\$72.00	
INDEP. CLAIMS	6	3	3	x \$88.00	\$264.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$336.00	
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 50-1419 in the amount of \$336.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1419 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						

05/10 2005 THAKIM 00000001 50-1419-1/70319

01 FC: 5202
02 FC: 1201

Kent A. Fischmann
Signature

Kent A. Fischmann, Esq.
Registration No. 35,511
MARSH FISCHMANN & BREYFOGLE LLP
3151 South Vaughn Way, Suite 411
Aurora, Colorado 80014
(720)562-5501

Dated: April 8, 2005

CERTIFICATE OF TRANSMISSION BY FACSIMILE

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING TRANSMITTED TO THE UNITED STATES PATENT AND TRADEMARK OFFICE VIA FAX NO. 703-872-9306 ON April 8, 2005.

Patricia S. Simon
Signature of Person Mailing Correspondence